

7/10/2020

Kim Tadlock 8004323622

(02/03) 07/10/2020 09:37:55 AM

Division of Corporations

**L20000195493**  
Florida Department of State  
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To:

Division of Corporations  
Fax Number : (850)617-6381

From:

Account Name : CAPITOL SERVICES, INC.  
Account Number : I20160000017  
Phone : (855)498-5500  
Fax Number : (800)432-3622

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FLORIDA LIMITED LIABILITY CO.  
OVIP, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

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*7/10/2020*

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**ARTICLES OF ORGANIZATION OF  
OVIP, LLC,  
A FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I  
NAME**

The name of the Limited Liability Company is OVIP, LLC (the "Limited Liability Company").

**ARTICLE II  
STREET ADDRESS AND MAILING ADDRESS**

The street address and mailing address of the principal office of the Limited Liability Company is as follows:

734 Franklin Ave  
Suite 1705  
Garden City, NY 11530

**ARTICLE III  
REGISTERED AGENT, REGISTERED OFFICE AND REGISTERED AGENT'S SIGNATURE**

The name and Florida street address of the registered agent are Capitol Corporate Services, Inc., 515 East Park Avenue, 2nd Floor, Tallahassee, Florida 32301.

Having been named as registered agent and to accept service of process for the above-stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605 of the Florida Statutes.

Capitol Corporate Services, Inc.

By: Kim Tadlock Kim Tadlock, Asst. Sec. on behalf of  
Capitol Corporate Services, Inc.

**ARTICLE IV  
MANAGER**

The Limited Liability Company shall be member-managed.

DocuSigned by:  
David Baghdassarian  
2C530C5F244E43D...

Date: July 10, 2020

David P. Baghdassarian, Authorized Person

In accordance with Section 605.0203 of the Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in Section 817.155 of the Florida Statutes.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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